DECT	PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2001								Application of Docket Number CDS -251					
///			CLAIMS A	S FILED - (Column	•		(Column 2)		SMALL I	NTITY OR		OTHER THAN SMALL ENTITY		
2	T	OTAL CLAIMS	3					RATE	FEE	1	RATE	FEE		
7	FK	DR	NUMBER FILED		NUMBER EXTRA			BASIC FE	<b>≆</b> 370.00	OR	BASIC FEE	740.00		
믜	77	OTAL CHARGE	3 minus 200		· 4		X\$ 9=	X\$ 9=		OR	X\$18=			
П	INI	DEPENDENT C	/ minus 3 =		φ			X42=		OR	X84=	<u> </u>		
3	MI	JLTIPLE DEPEN	IDENT CLAIM P	RESENT					+140=		OR	+280=	_	
님	• [	th difference	in column 1 is	less than zero, enter "0" in column 2				TOTAL		OR	TOTAL	740		
<		CLAIMS AS AMENDED - PART II								<del></del>		OTHER		
5			(Column 1)		(Colui	nn 2) (Column 3)			SMALL	ENTITY	OR	SMALL	ENTITY	
2	ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	AMENDMENT	Total	• 5	Minus	- 2	0	a		X\$ 9=		OR	X\$18=	)	
		Independent	• /	Minus		3	<u> </u>		X42=		OR	X84=	··	
	Ľ	FIRST PRESE	ENTATION OF MI	JLTIPLE DEI	PENDENT	CLAIM		<b>'</b>	+140=		OR	296		
								Δ	TOTAL ODIT. FEE		OR	TOTAL ADDIT, FEE	290.	
	16	3 3 Column 1) (Column 2) (Column 3							JUII. 1 CL		•			
	ENT B	٠.	CLAIMS REMAINING AFTER AMENOMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
1	Ş	Total	. 5	Minus	• 🔾	<u>Q</u>	. —	Н	X\$ 9=		OR	X\$18=		
	AMENDMENT	Independent	•	Minus	***	3	·		X42=		OR	X84=		
I	Ĺ	PIHST PHESE	NTATION OF ML	LIPLE DEF	CHUENI	CLAIM		<b>'</b>	+140=		OR	+280=		
			•		•			L	TOTAL		OR	TOTAL ADOIT, FEE		
İ			A	DOIT. FEE	·	•	AUUII. PEEI							
	N C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colum HIGH NUMI PREVIO PAID	ESY BER XUSLY	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	E	Total	•	Minus	**				X\$ 9=			X\$18=		
	AMENDMENT	Independent	•	Minus		<del></del> -		-			OR			
	Įŧ		NTATION OF MR			CLAIM	<u> </u>	L	X42=		OR	X84=		
								<u> </u>	+140=		OR	+280=		
	-	If the "Highest No.	mn i is less than th mber Previously Pa mber Previously Pa mber Previously Pai	id For IN THE	S SPACE is S SPACE is	s less tha	n 20, enter "20." in 3. enter "3."		TOYAL COIT. FEE of in the ap			TOTAL NDDIT. FEE With 1.		

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